Case 17-24948 Doc 3 Filed 06/06/17 Entered 06/06/17 15:30:12 Desc Main

| | | Faut 10144 |
|--------------------------|----------------------------------|---|
| rmation to identify your | case: | |
| Joni Ryver | | |
| First Name | Middle Name | Last Name |
| | | |
| First Name | Middle Name | Last Name |
| ankruptcy Court for the: | DISTRICT OF UTAH | |
| | | |
| | Joni Ryver First Name First Name | Trmation to identify your case: Joni Ryver First Name Middle Name First Name Middle Name |

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Pai | t 1: Summarize Your Assets | | |
|-----|--|--------------|--------------------------|
| | | Your as | ssets If what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 5,530.01 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 5,530.01 |
| Pai | t 2: Summarize Your Liabilities | | |
| | | | abilities t you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 8,500.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 29,396.88 |
| | Your total liabilities | \$ | 37,896.88 |
| Pai | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 1,650.10 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 1,634.00 |
| Pai | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ur other sch | nedules. |
| 7. | ■ Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for | a personal, | family, or |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

the court with your other schedules.

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Page 2 of 44 Case number (if known) Debtor 1 Joni Ryver

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14. | \$ | 1,237.80 |
|----|--|----|----------|
| | TELY VELICO VI, ON, VOIN VEES EING VI, ON VEES VELICO VI. | _ | |

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total cla | nim |
|--|-----------|----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 1,732.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 1,732.00 |

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| | | Documen | nt Page 3 of 44 | | |
|---------------------------------------|----------------------------|-----------------------------------|---|--|--|
| Fill in this infor | mation to identify your | case and this filing: | | | |
| Debtor 1 | Joni Ryver | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | First Name | Addula Nama | Leaf Name | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | DISTRICT OF UTAH | | | |
| Case number | | | | | П Оказа I : (СП-) - (-) - (-) |
| Case Hullibel | | | | | ☐ Check if this is an amended filing |
| | | | | | 3 |
| | | | | | |
| Official Fo | orm 106A/B | | | | |
| Schedul | le A/B: Prop | ertv | | | 12/15 |
| | | | e. If an asset fits in more than o | ne category, list the asset in | |
| hink it fits best. I | Be as complete and accura | ate as possible. If two married p | people are filing together, both a | re equally responsible for su | upplying correct |
| ntormation. It mo Answer every que | | a separate sheet to this form. | On the top of any additional pag | es, write your name and cas | e number (if known). |
| | | | | | |
| Part 1: Describe | Each Residence, Building | g, Land, or Other Real Estate Yo | ou Own or Have an Interest In | | |
| . Do you own or | have any legal or equitabl | e interest in any residence, bui | lding, land, or similar property? | | |
| _ | | | | | |
| No. Go to Pa | | | | | |
| ☐ Yes. Where | is the property? | | | | |
| Part 2: Describe | Your Vehicles | | | | |
| 200011110 | | | | | |
| | | | les, whether they are registe | | ehicles you own that |
| someone else dri | ives. If you lease a vehic | le, also report it on Schedule | G: Executory Contracts and U | Inexpired Leases. | |
| B. Cars, vans, ti | rucks, tractors, sport u | tility vehicles, motorcycles | | | |
| _ | | | | | |
| □ No | | | | | |
| Yes | | | | | |
| | | | | | |
| 3.1 Make: | Chevrolet | Who has an interest | t in the property? Check one | Do not deduct secured cl the amount of any secure | laims or exemptions. Put ed claims on <i>Schedule D:</i> |
| Model: | Impala | Debtor 1 only | | | ims Secured by Property. |
| Year: | 2008 | Debtor 2 only | | Current value of the | Current value of the |
| • • • | | ,000 Debtor 1 and Deb | tor 2 only | entire property? | portion you own? |
| Other infor | | At least one of the | e debtors and another | | |
| (Lien i | Prestige Financial) | ☐ Check if this is c | ommunity property | \$4,485.00 | \$4,485.00 |
| | | (see instructions) | oniniumly property | | |
| | | | | | |
| 1 Motorovoft o | iraraft mater hames A | TVo and other recreational | vahialaa athay vahialaa ana | d | |
| | | | vehicles, other vehicles, and ls, snowmobiles, motorcycle ad | | |
| , | , , , | , 3 | | | |
| ■ No | | | | | |
| ☐ Yes | | | | | |
| | | | | | |
| | | | | | |
| | | | ies from Part 2, including an | | \$4,485.00 |
| .pages you h | ave attached for Part 2 | . Write that number here | | => <u> </u> | Ψ4,463.00 |
| _ | | | | | |
| | Your Personal and Hous | | allauring item = 0 | | Current value of the |
| Do you own or | nave any legal or equit | able interest in any of the fo | ollowing items? | | Current value of the portion you own? |
| | | | | İ | Do not deduct secured |
| Househald - | oods and furnishings | | | | claims or exemptions. |
| , nousenoia g | oods and furnishings | | | | |

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

| Debtor 1 | Case 17-24 Joni Ryver | 1948 Doc 3 | Filed 06/06/17 Document | Entered 06/06/17 15:30 Page 4 of 44 Case number (iii | |
|--|---|---|---|---|---------------------------------------|
| ■ Yes. | Describe | | | | |
| | [| Bunk bed (twin ov | er twin). | | \$150.00 |
| | 9 | goods and furnish | | erefore, all of the household ole and separate property of isted herein. | \$0.00 |
| □ No | les: Televisions and | radios; audio, video, nones, cameras, medi | | ment; computers, printers, scanners; | music collections; electronic devices |
| | | Cell phone, laptop | , tablet, and 2 TVs. | | \$200.00 |
| Example ■ No □ Yes. 9. Equipm | other collection Describe nent for sports and | s, memorabilia, collect hobbies aphic, exercise, and o | tibles | ks, pictures, or other art objects; stan | |
| 10. Firear ı Exam _i ■ No | | shotguns, ammunition | , and related equipment | | |
| □ No | | nes, furs, leather coats | s, designer wear, shoes, | accessories | |
| | | olouses, sweaters, | , t-shirts, sweat shir orking shoes, casua | shorts, capris, sweat pants, ts, running shorts, tennis I shoes, socks, jacket, | \$150.00 |
| □ No | | elry, costume jewelry, e | engagement rings, wedc | ling rings, heirloom jewelry, watches, | gems, gold, silver |
| | [| Ring (gift from bes | t friend). | | \$125.00 |
| | Ţ | Various costume j | ewelry. | | \$20.00 |
| Exam _l □ No | arm animals ples: Dogs, cats, bir Describe | ds, horses | | | |

Official Form 106A/B Schedule A/B: Property page 2

Case 17-24948 Doc 3 Filed 06/06/17 Entered 06/06/17 15:30:12 Desc Main Document Page 5 of 44 Case number (if known) Joni Ryver Debtor 1 \$250.00 Dog (shih tzu-maltese), cat, and snake (python). 14. Any other personal and household items you did not already list, including any health aids you did not list □ No Yes. Give specific information..... Eye glasses and oxygen machine. \$150.00 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,045.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... **American Express Prepaid Card** \$0.01 Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

■ No

Official Form 106A/B

☐ Yes. List each account separately.

Type of account:

Institution name:

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

page 3

| _ | | | 8 Doc 3 | Filed 06/06/17 Document | Entered 06/06 Page 6 of 44 | | Desc Main |
|----|----------------------|---|---|--|-------------------------------|---------------------------|--|
| De | btor 1 | Joni Ryver | | | | ase number (if known) | |
| | Annuit ■ No | ies (A contract for a peri | odic payment o | of money to you, either for | life or for a number of y | years) | |
| I | ☐ Yes | lssuer na | me and descrip | otion. | | | |
| | 26 U.S.0 ■ No | C. §§ 530(b)(1), 529A(b) |), and 529(b)(1) | | | | |
| | ☐ Yes | Institution | name and des | scription. Separately file th | e records of any interes | sts.11 U.S.C. § 521(c): | |
| | No | | | | g listed in line 1), and | rights or powers exe | rcisable for your benefit |
| | | Give specific informatio | | | | | |
| | <i>Examp</i> ■ No | oles: Internet domain nar | mes, websites, | rets, and other intellecture proceeds from royalties a | | d'S | |
| | ⊔ Yes. | Give specific informatio | n about them | | | | |
| | Examp ■ No | | clusive license | s, cooperative association | n holdings, liquor licens | es, professional license | es |
| | ⊔ Yes. | Give specific informatio | n about them | • | | | |
| Мо | oney or | property owed to you? | • | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | No | funds owed to you Give specific information | n about them. ir | ncluding whether you alre | adv filed the returns and | d the tax vears | |
| | | | | | | | |
| 1 | <i>Examp</i> □ No | · | | ousal support, child suppo | ort, maintenance, divorc | e settlement, property | settlement |
| | Yes. | Give specific information | ٦ | | | | |
| | | | Chi | ild Support \$359 mo is severally delinque | | Child Support | Unknown |
| | Examp ■ No | amounts someone owe bles: Unpaid wages, disa benefits; unpaid loa Give specific informatio | ability insurance ans you made to | e payments, disability bend o someone else | efits, sick pay, vacation | pay, workers' comper | sation, Social Security |
| | | ts in insurance policie bles: Health, disability, or | | health savings account (I | HSA); credit, homeown | er's, or renter's insuran | ice |
| | Yes. | Name the insurance cor | | | _ | | |
| | | С | ompany name: | | Beneficiar | y: | Surrender or refund value: |
| | | Т | erm Life Insu hrough Emp 10.000 Death | loyer | Robert S | hayne Baker | \$0.00 |

Official Form 106A/B Schedule A/B: Property page 4 Case 17-24948 Doc 3 Filed 06/06/17 Entered 06/06/17 15:30:12 Desc Main Debtor 1

Joni Ryver

September 1 Page 7 of 44

Case number (if known)

September 2 Page 7 of 44

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died

| : | ny interest in property that is due you from someone who hat you are the beneficiary of a living trust, expect proceeds from a omeone has died. No Yes. Give specific information | | are currently entitled to rec | eive property because |
|--------------|---|------------------------------|-------------------------------|------------------------|
| | laims against third parties, whether or not you have filed a latexamples: Accidents, employment disputes, insurance claims, or No Yes. Describe each claim | | and for payment | |
| | | luding counterplaims | of the debter and rights to | a set off alaims |
| | ther contingent and unliquidated claims of every nature, inc No | luding counterclaims | or the debtor and rights to | Set on Claims |
| | Yes. Describe each claim | | | |
| _ | ny financial assets you did not already list No | | | |
| | Yes. Give specific information | | | |
| 36. | Add the dollar value of all of your entries from Part 4, includ for Part 4. Write that number here | | , , | \$0.01 |
| Part | Describe Any Business-Related Property You Own or Have an Int | erest In. List any real esta | ate in Part 1. | |
| 37. D | you own or have any legal or equitable interest in any business-rela | ated property? | | |
| | No. Go to Part 6. | | | |
| | Yes. Go to line 38. | | | |
| | Describe Any Farm- and Commercial Fishing-Related Property You lift you own or have an interest in farmland, list it in Part 1. you own or have any legal or equitable interest in any farm No. Go to Part 7. Yes. Go to line 47. | | | |
| Part | Describe All Property You Own or Have an Interest in That Y | ou Did Not List Above | | |
| | o you have other property of any kind you did not already lise. Examples: Season tickets, country club membership No Yes. Give specific information | st? | | |
| 54. | Add the dollar value of all of your entries from Part 7. Write t | that number here | | \$0.00 |
| Part | List the Totals of Each Part of this Form | | | |
| 55. | Part 1: Total real estate, line 2 | | | \$0.00 |
| 56. | Part 2: Total vehicles, line 5 | \$4,485.00 | | |
| 57. | Part 3: Total personal and household items, line 15 | \$1,045.00 | | |
| 58. | Part 4: Total financial assets, line 36 | \$0.01 | | |
| 59. | Part 5: Total business-related property, line 45 | \$0.00 | | |
| 60. 61. | Part 6: Total farm- and fishing-related property, line 52 Part 7: Total other property not listed, line 54 | + \$0.00 | | |
| | | | | |
| 62. | Total personal property. Add lines 56 through 61 | \$5,530.01 | Copy personal property t | otal \$5,530.01 |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 | | | \$5,530.01 |

Official Form 106A/B Schedule A/B: Property

Case 17-24948 Doc 3 Filed 06/06/17 Entered 06/06/17 15:30:12 Desc Main

| Fill in this infor | rmation to identify your | case: | | |
|---------------------|--------------------------|------------------|-----------|--------------------|
| Debtor 1 | Joni Ryver | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | DISTRICT OF UTAH | | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is |
| | | | | amended filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | | ount of the exemption you claim | Specific laws that allow exemption | |
|--|---|--------------------------------------|-----|---|--|--|
| | | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | | |
| | 2008 Chevrolet Impala 105,000 miles (Lien Prestige Financial) | \$4,485.00 | | \$0.00 | Utah Code Ann. § 78B-5-506(3) | |
| | Line from Schedule A/B: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | ., | |
| | Bunk bed (twin over twin). Line from Schedule A/B: 6.1 | \$150.00 | | \$150.00 | Utah Code Ann. § 78B-5-505(1)(a)(viii)(E) | |
| | Line Holl Schedule A/B. 4.1 | | | 100% of fair market value, up to any applicable statutory limit | 705 0 000(1)(a)(viii)(L) | |
| | Cell phone, laptop, tablet, and 2 TVs. | \$200.00 | | \$200.00 | Utah Code Ann. § 78B-5-506(1)(a) | |
| | | | | 100% of fair market value, up to any applicable statutory limit | 7.5. 2.5.3.(.), | |
| | Womens and childrens jeans, slacks, shorts, capris, sweat pants, blouses, | \$150.00 | | \$150.00 | Utah Code Ann. § 78B-5-505(1)(a)(viii)(D) | |
| | sweaters, t-shirts, sweat shirts, running shorts, tennis shoes, sandals, working shoes, casual shoes, socks, jacket, winter coat, and hats. Line from Schedule A/B: 11.1 | | | 100% of fair market value, up to any applicable statutory limit | | |

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| De | otor 1 Joni Ryver | | | Case number (if known) | |
|----|---|--------------------------------------|---------|---|--|
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Am | ount of the exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| | Ring (gift from best friend). Line from Schedule A/B: 12.1 | \$125.00 | | \$125.00 | Utah Code Ann. § 78B-5-506(1)(d) |
| | | | | 100% of fair market value, up to any applicable statutory limit | , and the second |
| | Dog (shih tzu-maltese), cat, and snake (python). | \$250.00 | | \$250.00 | Utah Code Ann. § 78B-5-506(1)(c) |
| | Line from Schedule A/B: 13.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Eye glasses and oxygen machine. Line from Schedule A/B: 14.1 | \$150.00 | | \$150.00 | Utah Code Ann. § 78B-5-505(1)(a)(ii) |
| | | | | 100% of fair market value, up to any applicable statutory limit | , and the second |
| | Child Support: Child Support \$359 monthly (ex-spouse is severally | Unknown | | \$0.00 | Utah Code Ann. § 78B-5-505(1)(a)(vi) |
| | delinquent). Line from Schedule A/B: 29.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Line from Schedule A/B. 23.1 | | | any applicable statutory limit | |
| | Term Life Insurance Through Employer | \$0.00 | | \$0.00 | Utah Code Ann. § 78B-5-505(1)(a)(xiii) |
| | \$10,000 Death Benefit Beneficiary: Robert Shayne Baker Line from Schedule A/B: 31.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Term Life Insurance Through Employer | \$0.00 | | \$0.00 | Utah Code Ann. § 78B-5-505(1)(a)(xii) |
| | \$10,000 Death Benefit Beneficiary: Robert Shayne Baker Line from Schedule A/B: 31.1 | | | 100% of fair market value, up to any applicable statutory limit | 702 0 000(1)(a)(xii) |
| | Term Life Insurance Through Employer | \$0.00 | | \$0.00 | Utah Code Ann. § 78B-5-505(1)(a)(xi) |
| | \$10,000 Death Benefit Beneficiary: Robert Shayne Baker Line from Schedule A/B: 31.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| 3. | Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3 | | | led on or after the date of adjustmer | nt.) |
| | No | | | | |
| | Yes. Did you acquire the property covered No | ed by the exemption wi | ithin 1 | ,215 days before you filed this case | ? |
| | ☐ Yes | | | | |

| | Case 17-2 | 4948 | Doc 3 | Filed 06/06/17 Document | ⁷ Entered Page 10 | d 06/06/17 15:30 of 44 | :12 Desc M | lain |
|-------------------------------|---------------------------------------|-----------------|------------------------------------|---|---------------------------------|---|--|-----------------------------------|
| Fill in this | information to ic | lentify you | r case: | DAMMINA | 1 1000, 10 | VI | | |
| Debtor 1 | Joni Ry First Name | | Mide | dle Name | Last Name | | | |
| Debtor 2 (Spouse if, filir | ng) First Name | • | Mide | dle Name | Last Name | | | |
| United Sta | tes Bankruptcy Co | ourt for the: | DISTRIC | CT OF UTAH | | | | |
| Case numl | ber | | | | | | _ | if this is an led filing |
| | Form 106D ule D: Cre | ditors | Who F | lave Claims | Secured | by Property | | 12/15 |
| s needed, c number (if k | opy the Additional mown). | Page, fill it o | out, number t | he entries, and attach it | | ally responsible for suppl the top of any additional | | |
| | editors have claims | • | | • | | | | |
| | | | | ne court with your othe | r schedules. Yo | u have nothing else to re | eport on this form. | |
| Yes | s. Fill in all of the in | nformation I | below. | | | | | |
| Part 1: | List All Secured | Claims | | | | | | |
| for each clai | im. If more than one | creditor has | a particular c | secured claim, list the crulaim, list the other creditor rding to the creditor's name | rs in Part 2. As | Amount of claim Do not deduct the | Column B Salue of collateral hat supports this laim | Column C Unsecured portion If any |
| | stige Financial | Svc | Describe th | e property that secures | the claim: | \$8,500.00 | \$4,485.00 | \$4,015.00 |
| Attn | or's Name n: Bankruptcy artment | | | evrolet Impala 105, restige Financial) | 000 miles | | | |
| PO E Salt | Box 26707 Lake City, UT 26-0707 | | As of the da apply. Continge | ate you file, the claim is: | Check all that | | | |
| | er, Street, City, State & Z | | ☐ Unliquida ☐ Disputed Nature of I | | | | | |
| ■ Debtor 1 □ Debtor 2 | • | | An agree | ement you made (such as i) | mortgage or secu | ured | | |
| | and Debtor 2 only | | ☐ Statutory | lien (such as tax lien, me | echanic's lien) | | | |
| | one of the debtors ar | | ŭ | nt lien from a lawsuit | | | | |
| | f this claim relates t inity debt | to a | Other (in | cluding a right to offset) | Car Loan | | | |
| Date debt w | vas incurred 03/2 | 2017 | Last | 4 digits of account num | nber | | | |
| Add the d | dollar value of your | entries in C | olumn A on t | his nage. Write that nun | nher here: | \$8 500 (| 20 | |

If this is the last page of your form, add the dollar value totals from all pages. \$8,500.00 Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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| | | Document | Page 11 of 4 | 14 | • | | |
|---|--|--|---|-------------------------|-----------------|-------------------|-----------------|
| Fill in this info | rmation to identify your o | case: | | | | | |
| Debtor 1 | Joni Ryver | | | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | | | |
| United States B | ankruptcy Court for the: | DISTRICT OF UTAH | | | | | |
| Coop number | | | | | | | |
| Case number (if known) | | | | | | Check if this | is an |
| | | | | | _ | amended filir | ng |
| ~"···- | 4005/5 | | | | | | |
| Official For | | | | | | | = |
| | | ho Have Unsecured Part 1 for creditors with PRIORIT | | | | | 2/15 |
| schedule D: Cred eft. Attach the Co ame and case no | itors Who Have Claims Sect ontinuation Page to this page umber (if known). | ired Leases (Official Form 106G). I ured by Property. If more space is e. If you have no information to re | needed, copy the Part | you need, fill it out, | number the | entries in the b | oxes on the |
| | All of Your PRIORITY Un | | | | | | |
| | tors have priority unsecured | d claims against you? | | | | | |
| ☐ No. Go to | Part 2. | | | | | | |
| Yes. | | | | | | | |
| identify what to possible, list to | type of claim it is. If a claim ha he claims in alphabetical orde | i. If a creditor has more than one prices s both priority and nonpriority amour r according to the creditor's name. If tricular claim, list the other creditors | nts, list that claim here a f you have more than two | nd show both priority a | and nonpriori | ity amounts. As n | nuch as |
| (For an expla | nation of each type of claim, s | ee the instructions for this form in the | e instruction booklet.) | _ | | | |
| | | | | Total claim | Priority amount | Nonp amou | oriority unt |
| 2.1 Interna | al Revenue Service | Last 4 digits of accou | unt number | \$0.00 | | \$0.00 | \$0.00 |
| • | Creditor's Name | | | - | | | |
| Centra Opera | lized Insolvency | When was the debt in | ncurred? | | _ | | |
| • | Office Box 21126 | | | | | | |
| | elphia, PA 19114-0326 | | | | | | |
| | Street City State Zlp Code ed the debt? Check one. | <u>_</u> | e, the claim is: Check a | all that apply | | | |
| _ | | ☐ Contingent | | | | | |
| Debtor 1 | , | ☐ Unliquidated | | | | | |
| Debtor 2 | only | ☐ Disputed | | | | | |
| Debtor 1 | and Debtor 2 only | Type of PRIORITY un | | | | | |
| ☐ At least | one of the debtors and anothe | r Domestic support of | bligations | | | | |
| ☐ Check if | this claim is for a commun | ity debt Taxes and certain of | other debts you owe the | government | | | |
| Is the claim | subject to offset? | Claims for death or | personal injury while yo | ou were intoxicated | | | |
| ■ No | | Other. Specify | | | | | |
| ☐ Yes | | N | otice Only | | | | |

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| Debt | or 1 Joni Ryver | | Case number (if know) | | |
|-----------------|--|--|--|--------------------------|--------|
| 2.2 | Utah State Tax Commission | Last 4 digits of account number | \$0.00 | \$0.00 | \$0.00 |
| | Priority Creditor's Name 210 N 1950 W | When was the debt incurred? | | | |
| | Salt Lake City, UT 84134 Number Street City State Zlp Code | As of the date you file, the claim is: | Check all that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | |
| | Debtor 1 only | ☐ Unliquidated | | | |
| | ☐ Debtor 2 only | ☐ Disputed | | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of PRIORITY unsecured claim: | : | | |
| | ☐ At least one of the debtors and another | ☐ Domestic support obligations | | | |
| | ☐ Check if this claim is for a community debt | Taxes and certain other debts you | owe the government | | |
| | Is the claim subject to offset? | ☐ Claims for death or personal injury | while you were intoxicated | | |
| | ■ No | ☐ Other. Specify | | | |
| | Yes | Notice Only | | | |
| Part | 2: List All of Your NONPRIORITY Unsecu | red Claims | | | |
| 4. L u th | ■ No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the insecured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other art 2. | alphabetical order of the creditor who aim. For each claim listed, identify what | b holds each claim. If a creditor has more type of claim it is. Do not list claims already | included in Part 1. If m | |
| | | | | Total claim | |
| 4.1 | Apline Home Medical | Last 4 digits of account number | Unknown | Unkn | own |
| | Nonpriority Creditor's Name 1395 N 400 E | When was the debt incurred? | Unknown | | |
| | Logan, UT 84341 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did n | ot | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | | |
| | ☐ Yes | Other. Specify Unsecured | | | |

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Debtor 1 Joni Ryver Case number (if know) 4.2 **BONNEVILLE COLLECTIONS** \$925.00 Last 4 digits of account number 2245 Nonpriority Creditor's Name **6026 FASHION POINT DR** When was the debt incurred? Jun 30, 2014 South Ogden, UT 84403 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Unsecured Other. Specify 4.3 **Check City** Last 4 digits of account number Unknown Unknown Nonpriority Creditor's Name PO Box 970183 When was the debt incurred? Unknown Orem. UT 84097 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Unsecured Other, Specify 4.4 **Check Smart** Last 4 digits of account number Unknown Unknown Nonpriority Creditor's Name 40 East 4500 South When was the debt incurred? Unknown Salt Lake City, UT 84107 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Unsecured Other. Specify

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Debtor 1 Joni Ryver Case number (if know) 4.5 **COLLECTION CENTER-WYOMIN** \$116.00 Last 4 digits of account number 8406 Nonpriority Creditor's Name **PO BOX 4000** When was the debt incurred? May 25, 2016 Rawlins, WY 82301-0479 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Unsecured Other. Specify 4.6 **CREDIT COLLECTION SERVIC** Last 4 digits of account number 7845 \$144.00 Nonpriority Creditor's Name **PO BOX 607** When was the debt incurred? Apr 18, 2013 Norwood, MA 02062 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Unsecured Other. Specify 4.7 **ENHANCED RECOVERY COMPAN** Last 4 digits of account number 2221 \$897.00 Nonpriority Creditor's Name PO BOX 57547 When was the debt incurred? Jan 21, 2014 Jacksonville, FL 32241 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Unsecured Other. Specify

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| Jebioi | John Kyver | | Case Humber (II know) | |
|----------|--|--|---|------------|
| 1.8 | Express Recovery | Last 4 digits of account number | 8573 | \$1,590.00 |
| | Nonpriority Creditor's Name PO Box 26415 | When was the debt incurred? | Jun 15, 2011 | |
| | Salt Lake City, UT 84126-0415 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | • | | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | \square Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | Yes | Other. Specify Unsecured | | |
| 4.9 | FED LOAN SERV | Last 4 digits of account number | 8896 | \$1,732.00 |
| | Nonpriority Creditor's Name PO BOX 60610 | When was the debt incurred? | Apr 30, 2017 | |
| | Harrisburg, PA 17106 | _ | | |
| | Number Street City State ZIp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | O continuent | | |
| | Debtor 1 only | ☐ Contingent☐ Unliquidated | | |
| | Debtor 2 only | ☐ Disputed | | |
| | Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecure | d claim: | |
| | At least one of the debtors and another | Student loans | | |
| | ☐ Check if this claim is for a community debt | Obligations arising out of a sepa | aration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | ■ No | Debts to pension or profit-sharing | | |
| | ☐ Yes | Other. Specify | | |
| | | Education | | |
| 4.1) | FOX COLLECTION CENTER | Last 4 digits of account number | 3698 | \$200.00 |
| | Nonpriority Creditor's Name POB 528 | When was the debt incurred? | Oct 15, 2013 | |
| | Goodlettsville, TN 37070 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | • | | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharir | ng plans, and other similar debts | |
| | □ Yes | | | |
| | □ 162 | Other. Specify Unsecured | | |

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Debtor 1 Joni Ryver Case number (if know) 4.1 **Granger Medical** Unknown Unknown Last 4 digits of account number Nonpriority Creditor's Name PO Box 70658 When was the debt incurred? Unknown Salt Lake City, UT 84170-0658 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Unsecured ☐ Yes 4.1 I C SYSTEM 8596 \$1,059.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 64378 When was the debt incurred? May 13, 2014 Saint Paul, MN 55164 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical ☐ Yes 4.1 Intermountain Healthcare Unknown Unknown Last 4 digits of account number Nonpriority Creditor's Name **Patient Financial Services** When was the debt incurred? Unknown PO Box 410400 Salt Lake City, UT 84141-0500 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Unsecured

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| Debt | or i Joni Ryver | Case number (if know) | |
|----------|--|--|------------|
| 4.1 4 | KNIGHT ADJ BUREAU | Last 4 digits of account number 8523 | \$832.00 |
| | Nonpriority Creditor's Name 5525 S 900 ESTE 215 | When was the debt incurred? Jul 30, 2013 | |
| | Salt Lake City, UT 84117 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | Политически | |
| | _ | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| | At least one of the debtors and another | Student loans | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | • | <u></u> | |
| | ■ No □ Yes | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Unsecured | |
| | | | |
| 4.1 5 | Larry H Miller Enterprises Nonpriority Creditor's Name | Last 4 digits of account number | \$1,500.00 |
| | 9350 South 150 East, Ste. 1000 Sandy, UT 84070 | When was the debt incurred? 03/2017 | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | Other. Specify Unsecured | |
| 4.1 | Liberty Aquisitions Serviving, LLC | Last 4 digits of account number 6863 | \$1,156.88 |
| | Nonpriority Creditor's Name c/o Scott Skeen, Esq. | When was the debt incurred? | |
| | PO Box 17210 | | |
| | Golden, CO 80402 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | , | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify Unsecured | |

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Document Page 18 of 44 Debtor 1 Joni Ryver Case number (if know) 4.1 **Mountain America Credit Union** Unknown Unknown Last 4 digits of account number Nonpriority Creditor's Name PO Box 9001 When was the debt incurred? Unknown West Jordan, UT 84084 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Unsecured ☐ Yes 4.1 **MOUNTAIN LAND COLLECTION** 5541 Last 4 digits of account number \$2,402.00 8 Nonpriority Creditor's Name **PO BOX 1280** When was the debt incurred? Nov 5, 2013 American Fork, UT 84003-6280 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent □ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Unsecured ☐ Yes 4.1 MOUNTAIN LAND COLLECTION 5536 \$2,198,00 9 Last 4 digits of account number Nonpriority Creditor's Name **PO BOX 1280** When was the debt incurred? Aug 15, 2016 American Fork, UT 84003-6280 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: lacksquare At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

report as priority claims

■ Other. Specify Unsecured

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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| Debto | or 1 Joni Ryver | Case | number (if know) | |
|-------|--|---|---------------------------------------|------------|
| 4.2 | MOUNTAIN LAND COLLECTION Nonpriority Creditor's Name PO BOX 1280 American Fork, UT 84003 6380 | Last 4 digits of account number When was the debt incurred? Jur | 17, 2013 | \$1,173.00 |
| | American Fork, UT 84003-6280 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Che | ck all that apply | |
| | ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only | ☐ Contingent ☐ Unliquidated ☐ Disputed | | |
| | ☐ At least one of the debtors and another☐ Check if this claim is for a community debt Is the claim subject to offset? | Type of NONPRIORITY unsecured claim ☐ Student loans ☐ Obligations arising out of a separation report as priority claims | | |
| | ■ No □ Yes | ☐ Debts to pension or profit-sharing plans ☐ Other. Specify | s, and other similar debts | |
| 4.2 | MOUNTAIN LAND COLLECTION Nonpriority Creditor's Name | Last 4 digits of account number 784 | 5 | \$1,128.00 |
| | PO BOX 1280 American Fork, UT 84003-6280 Number Street City State Zlp Code Who incurred the debt? Check one. | When was the debt incurred? Feb As of the date you file, the claim is: Che | o 11, 2013 cck all that apply | |
| | ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another | ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim ☐ Student loans | 1: | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No ☐ Yes | Obligations arising out of a separation report as priority claims Debts to pension or profit-sharing plans | | |
| 4.2 | | — Cirici. Openity | | **** |
| 2 | MOUNTAIN LAND COLLECTION Nonpriority Creditor's Name PO BOX 1280 American Fork, UT 84003-6280 Number Street City State Zlp Code Who incurred the debt? Check one. | When was the debt incurred? As of the date you file, the claim is: Che | 7, 2011 | \$998.00 |
| | ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim ☐ Student loans ☐ Obligations arising out of a separation report as priority claims | agreement or divorce that you did not | |
| | ■ No □ Yes | □ Debts to pension or profit-sharing plans ■ Other. Specify Unsecured | s, and other similar debts | |

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Debtor 1 Joni Ryver Case number (if know) 4.2 **MOUNTAIN LAND COLLECTION** 8520 \$4,785.00 Last 4 digits of account number 3 Nonpriority Creditor's Name **PO BOX 1280** When was the debt incurred? Feb 6, 2014 American Fork, UT 84003-6280 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Unsecured 4.2 **NAR INC** 5587 \$4,355.00 Last 4 digits of account number Nonpriority Creditor's Name 1600 West 2200 South Suite 410 When was the debt incurred? Jun 1, 2016 Salt Lake City, UT 84119 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent □ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Unsecured ☐ Yes 4.2 **OUTSOURCE RECEIVABLES MG** 8976 \$536.00 Last 4 digits of account number Nonpriority Creditor's Name 3017 TAYLOR When was the debt incurred? Jun 23, 2011 Ogden, UT 84403 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Unsecured

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| Debt | or 1 Joni Ryver | | Case number (if know) | |
|----------|---|--|--|------------|
| 4.2 6 | Sprint | Last 4 digits of account number | Unknown | Unknown |
| | Nonpriority Creditor's Name | When we do | Halmanna | |
| | PO Box 54977 Los Angeles, CA 90054-0977 | When was the debt incurred? | Unknown | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | Other. Specify Unsecured | | |
| 4.2 | 07 | | 0500 | 44 070 00 |
| 7 | STELLAR RECOVERY Nonpriority Creditor's Name | Last 4 digits of account number | <u>8596</u> | \$1,079.00 |
| | PO BOX 48370 | When was the debt incurred? | Aug 5, 2016 | |
| | Jacksonville, FL 32247 | | 7.0.9 0, 2010 | |
| | Number Street City State Zlp Code | As of the date you file, the claim | s: Check all that apply | |
| | Who incurred the debt? Check one. | _ | | |
| | Debtor 1 only | Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | Disputed | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | |
| | Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | ☐ Yes | | 31, | |
| | Li Tes | Other. Specify Unsecured | | |
| 4.2 8 | The Cash Store | Last 4 digits of account number | Unknown | Unknown |
| | Nonpriority Creditor's Name 5642 South 900 East, Suite B-4 | When was the debt incurred? | Unknown | |
| | Salt Lake City, UT 84117 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | , | | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt | ☐ Obligations arising out of a sepa | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | • | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify Unsecured | | |

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Case number (if know)

| Debio | John Ryver | | Case Humber (II know) | | | |
|----------|--|---|---|----------|--|--|
| 4.2 9 | Unique National Collections | Last 4 digits of account number | 2356 | \$151.00 | | |
| | Nonpriority Creditor's Name 119 E Maple St. | When was the debt incurred? | Oct 23, 2012 | | | |
| | Jeffersonville, IN 47130 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | |
| | Debtor 1 only | ☐ Contingent | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | | | |
| | Yes | Other. Specify Unsecured | | | | |
| 4.3 | Virtuoso Sourcing Group | Last 4 digits of account number | 7539 | \$440.00 | | |
| | Nonpriority Creditor's Name 4500 Cherry Creek South Drive, | When was the debt incurred? | Dec 11, 2016 | | | |
| | Suite 300 Denver, CO 80246 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | | | |
| | Who incurred the debt? Check one. | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | | | | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | | | |
| | Yes | Other. Specify Unsecured | | | | |
| 4.3 | WELLS FARGO BANK | Last 4 digits of account number | Unknown | Unknown | | |
| | Nonpriority Creditor's Name PO BOX 14517 | When was the debt incurred? | Unknown | | | |
| | Des Moines, IA 50306 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | | |
| | Who incurred the debt? Check one. | As of the date you me, the claim | в. Спеск ан так арру | | | |
| | Debtor 1 only | ☐ Contingent | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | | | | |
| | ☐ At least one or the deptors and another ☐ Check if this claim is for a community | Student loans | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | |
| | ■ No | Debts to pension or profit-sharir | ng plans, and other similar debts | | | |
| | ☐ Yes | | | | | |
| | □ 162 | Other. Specify Unsecured | | | | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Joni Ryver

Name and Address STELLAR RECOVERY INC 1327 HIGHWAY 2 WEST, SUITE 100 Kalispell, MT 59901

On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.27 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|--------------|-----|---|-----|-----------------|
| | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| Total claims | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 0.00 |
| | | | | Total Claim |
| | 6f. | Student loans | 6f. | \$ 1,732.00 |
| Total claims | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 27,664.88 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 29,396.88 |

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| | | DOGMINA | 1 1000 24 01 44 | |
|---------------------|--------------------------|------------------|-----------------|-----------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Joni Ryver | | | |
| | First Name | Middle Name | Last Name | _ |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | DISTRICT OF UTAH | | _ |
| Case number | | | | |
| (if known) | | <u> </u> | | ☐ Check if this |
| | | | | amended fil |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | r company with Name, Numbe | whom you have the r, Street, City, State and ZIP (| contract or lease | State what the contract or lease is for |
|-----|-----------|--------------------------------------|---|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | |
| | | | | | |
| | Number | Street | | | |
| | 0'' | | 01.1 | 710.0 | |
| 2.2 | City | | State | ZIP Code | |
| 2.2 | Name | | | | _ |
| | ranio | | | | |
| | Number | Street | | | _ |
| | Number | Olicot | | | |
| | City | | State | ZIP Code | _ |
| 2.3 | | | | | |
| | Name | | | | |
| | | | | | |
| | Number | Street | | | |
| | | | | | _ |
| 2.4 | City | | State | ZIP Code | |
| 2.4 | Name | | | | <u> </u> |
| | INAITIE | | | | |
| | Niverborn | 04 | | | <u> </u> |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.5 | | | | | |
| | Name | | | | |
| | | | | | |
| | Number | Street | | | |
| | | | | | <u> </u> |
| | City | | State | ZIP Code | |

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| | | Docume | <u>ent Page 25 d</u> | of 44 | |
|------------------------|--|---|---------------------------|---|--------------------|
| Fill in thi | s information to identify you | r case: | | | |
| Debtor 1 | lani Dunan | | | | |
| Debioi i | Joni Ryver First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, fi | iling) First Name | Middle Name | Last Name | | |
| United St | ates Bankruptcy Court for the: | DISTRICT OF UTAH | | | |
| Case nun | nhar | | | | |
| (if known) | | | | ☐ Check | if this is an |
| | | | | amend | ded filing |
| | | | | | |
| Officia | al Form 106H | | | | |
| Scha | dule H: Your Cod | lahtors | | | 12/15 |
| JCHE | dule II. Tour Coc | ientoi 3 | | | 12/15 |
| ill it out, our nam | and number the entries in the e and case number (if known | e boxes on the left. Attach n). Answer every question | the Additional Page : | cion. If more space is needed, copy the coordinate of this page. On the top of any Additional costs a codebtor. | |
| 1. Do | you have any codebtors? (If | f you are filing a joint case, o | do not list either spouse | as a codebtor. | |
| ■ No | | | | | |
| Arizo ■ No □ Ye | ona, California, Idaho, Louisiana o. Go to line 3. es. Did your spouse, former spo | a, Nevada, New Mexico, Pu ouse, or legal equivalent live | erto Rico, Texas, Wash | y? (Community property states and territo ington, and Wisconsin.) Tif your spouse is filing with you. List the | |
| in lin Form | e 2 again as a codebtor only | if that person is a guaran | tor or cosigner. Make | sure you have listed the creditor on Sci 16G). Use Schedule D, Schedule E/F, or | hedule D (Official |
| | Column 1: Your codebtor Name, Number, Street, City, State and 2 | ZIP Code | | Column 2: The creditor to whom you Check all schedules that apply: | ou owe the debt |
| 3.1 | | | | ☐ Schedule D, line | |
| 3.1 | Name | | | - <u>-</u> | |
| | | | | ☐ Schedule E/F, line | |
| | | | | Schedule G, line | |
| | Number Street | | | | |
| | City | State | ZIP Code | | |
| 3.2 | | | | ☐ Schedule D, line | |
| 5.2 | Name | | | Schedule E/F, line | |
| | | | | ☐ Schedule G, line | |
| | | | | | |
| | Number Street | 01-1- | 710.0-1- | | |
| | City | State | ZIP Code | | |

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| | | | | | | | _ | | | | |
|-------------|--|---|--|-----------------------------------|------------|------|-------------|-----------------------|--------------------------|----------------------------------|----------|
| Fill | in this information | to identify your ca | ase: | | | | | | | | |
| Deb | otor 1 | Joni Ryver | | | | | | | | | |
| | otor 2 buse, if filing) | | | | | | | | | | |
| Uni | ted States Bankrup | otcy Court for the | DISTRICT OF UTAH | | | | | | | | |
| | se number | | | | | | □ A | | ed filing ent showing | g postpetition ollowing date: | |
| 0 | fficial Form | 106 <u>l</u> | | | | | M | M / DD/ Y | YYY | | |
| S | chedule I: | Your Inc | ome | | | | | , 22, . | | | 12/15 |
| spo atta | use. If you are sep ch a separate she | parated and you eet to this form. (be Employment | are married and not filii r spouse is not filing wi On the top of any additi | ith you, do not inclu | ıde infor | mati | on about | your spo imber (if | ouse. If mo known). A | ore space is | needed, |
| | If you have more | than one job | | ■ Employed | | | | ☐ Empl | | 9 - | |
| | attach a separate page with information about additional | | Employment status | ☐ Not employed | | | | ☐ Not e | • | | |
| | | employers. | Occupation | Supplies | | | | | | | |
| | Include part-time self-employed wo | | Employer's name | Mount Olympu | s Rehat |) | | | | | |
| | Occupation may or homemaker, if | | Employer's address | 2200 East 3300 Salt Lake City, | |)9 | | | | | |
| | | | How long employed to | here? | | | | _ | | | |
| Par | t 2: Give De | etails About Mor | thly Income | | | | | | | | |
| | mate monthly incuse unless you are | | ate you file this form. If | you have nothing to ı | report for | any | line, write | \$0 in the | space. Inc | clude your no | n-filing |
| | u or your non-filing e space, attach a s | | ore than one employer, co this form. | ombine the information | on for all | empl | oyers for | that perso | on on the lir | nes below. If | you need |
| | | | | | | | For Deb | otor 1 | | otor 2 or ng spouse | |
| 2. | | | ry, and commissions (b calculate what the monthl | | 2. | \$ | 2, | 064.00 | \$ | N/A | |
| 3. | Estimate and lis | st monthly overti | ime pay. | | 3. | +\$ | | 0.00 | +\$ | N/A | |
| 4. | Calculate gross | Income. Add lin | ne 2 + line 3. | | 4. | \$ | 2,06 | 64.00 | \$ | N/A | |

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| Debto | r 1 | Joni Ryver | - | С | ase numb | er (if kr | own) | | | | |
|-------|--|---|-------|-----|----------|-----------|------------|---------------|--------|---------------------|--------------------|
| | | | | | For Deb | tor 1 | | | Debtor | | |
| | Cop | by line 4 here | 4. | | \$ | 2,064 | .00 | \$ | | N/A | <u>\</u> |
| 5. | List | all payroll deductions: | | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | ١. | \$ | 306 | .40 | \$ | | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | ١. | \$ | | .00 | \$ | | N/A | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | | \$ | (| .00 | \$ | | N/A | \ |
| | 5d. | Required repayments of retirement fund loans | 5d. | l. | \$ | C | .00 | \$ | | N/A | \ |
| | 5e. | Insurance | 5e. | | \$ | 107 | <u>.50</u> | \$_ | | N/A | |
| | 5f. | Domestic support obligations | 5f. | | \$ | | .00 | \$_ | | N/A | |
| | 5g. 5h. | Union dues | 5g. | | \$ | | .00 | , <u>\$</u> _ | | N/A | |
| | | Other deductions. Specify: | _ 5h. | | · — | | .00 | + \$_ | | N/A | |
| | | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | , | · | | .90 | \$_ | | N/A | |
| 7. | Cal | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | , | <u> </u> | 1,650 | .10 | \$ | | N/A | <u>\</u> |
| | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | | | | | |
| | | monthly net income. | 8a. | ١. | \$ | (| .00 | \$ | | N/A | \ |
| | 8b. | Interest and dividends | 8b. | ١. | \$ | C | .00 | \$ | | N/A | <u> </u> |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | | \$ | C | .00 | \$ | | N/A | |
| | 8d. | Unemployment compensation | 8d | | \$ | | .00 | \$_ | | N/A | _ |
| | 8e. | Social Security | 8e. | ٠. | \$ | | .00 | \$_ | | N/A | <u>\</u> |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | | \$ | | 0.00 | \$ | | N/A | |
| | 8g. | Pension or retirement income | 8g. | | \$ | | .00 | \$_ | | N/A | |
| | 8h. | Other monthly income. Specify: | _ 8h | 1.+ | \$ | | .00 | + \$_ | | N/A | <u>\</u> |
| 9. | Add | d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | | C | .00 | \$_ | | N/ | Ά |
| 10 | Cal | culate monthly income. Add line 7 + line 9. | 10. | \$ | 1 65 | 0.10 | + \$ | | N/A | = \$ | 1,650.10 |
| | | I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | Ψ_ | 1,00 | 0.10 | . * | | IVA | | 1,030.10 |
| 11. | State Inclided the other of the | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify: | depe | | | | | • | | ∍ <i>J</i> . +\$ | 0.00 |
| | | If the amount in the last column of line 10 to the amount in line 11. The rest te that amount on the Summary of Schedules and Statistical Summary of Certain lies | | | | | | | 12. | \$ | 1,650.10 |
| 13. | Do : | you expect an increase or decrease within the year after you file this form | ? | | | | | | · | Comb | ined Ily income |
| | | No. | | | | | | | | | |

Official Form 106I Schedule I: Your Income page 2

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| Fill | in this informa | tion to identify yo | ur case: | | | | | | | |
|-------------|--------------------------|--|-------------------------|---|--|-----------|---------|-----------------|-------------------------------|-------|
| | tor 1 | | | | | Ck | anak if | this is: | | |
| Den | IOI I | Joni Ryver | | | | | | amended filing | | |
| Deb | tor 2 | | | | | | | • | ving postpetition cha | pter |
| (Spc | ouse, if filing) | | | | | | 13 | expenses as of | the following date: | |
| Unite | ed States Bankr | uptcy Court for the: | DISTRI | CT OF UTAH | | | MN | // DD / YYYY | | |
| Case | e number | | | | | | | | | |
| ! | nown) | | | | | | | | | |
| Of | fficial Fo | rm 106J | | | | | | | | |
| | | J: Your E | Exper | ISAS | | | | | | 12/15 |
| Be a | as complete a | and accurate as | possible. eded, atta | If two married people ar ch another sheet to this | | | | | | t |
| Part | | ibe Your House | hold | | | | | | | |
| 1. | Is this a join | | | | | | | | | |
| | ■ No. Go to | | | -t- bb-140 | | | | | | |
| | _ | s Debtor 2 live in | n a separ | ate nousehold? | | | | | | |
| | □ No | | t file Offici | al Form 106J-2, <i>Expenses</i> | for Separate Housel | hold of D | ebtor 2 | 2. | | |
| 2. | Do vou have | e dependents? | □ No | | | | | | | |
| | Do not list De Debtor 2. | • | Yes. | Fill out this information for each dependent | Dependent's relation Debtor 1 or Debtor | | | Dependent's age | Does dependent live with you? | |
| | Do not ototo | th o | | | | | | | □ No | |
| | Do not state dependents | | | | Daughter | | | 6 | ■ Yes | |
| | • | | | | | | | | □ No | |
| | | | | | Daughter | | | 8 | ■ Yes | |
| | | | | | | | | | □ No | |
| | | | | | | | | | ☐ Yes | |
| | | | | | | | | | □ No | |
| 2 | Da | | _ | | - | | | | ☐ Yes | |
| 3. | expenses of yourself and | enses include f people other th d your depender ate Your Ongoir | nan nts? | No Yes | | | | | | |
| Esti exp | imate your ex | penses as of yo | our bankrı | uptcy filing date unless y y is filed. If this is a supp | | | | | | |
| the | | n assistance and | | government assistance i luded it on <i>Schedule I:</i>) | | | | Your expe | enses | |
| 4. | | or home ownershind any rent for the | | ses for your residence. I | nclude first mortgage | 4. | \$_ | | 400.00 | |
| | If not includ | led in line 4: | | | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. | \$ | | 0.00 | |
| | 4b. Proper | rty, homeowner's | | | | 4b. | · : — | | 0.00 | |
| | | | | ipkeep expenses | | 4c. | · : — | | 0.00 | |
| _ | | owner's associati | | | ma aquitu la ara | 4d. | | | 0.00 | |
| 5. | Additional n | nortgage payme | ents for yo | our residence, such as ho | me equity loans | 5. | \$ | | 0.00 | |

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| 1 Joni Ry | ver | Case num | ber (if known) | |
|--|--|---|--|--|
| tilities: | | | | |
| | v. heat, natural gas | 6a. | \$ | 0.00 |
| • | • | | | 0.00 |
| | | | · | 120.00 |
| | | | · | 0.00 |
| | | | | 300.00 |
| | | | · | |
| | | | · | 0.00 |
| - | • | | · | 25.00 |
| | • | | | 25.00 |
| | • | 11. | \$ | 55.00 |
| | | 12 | \$ | 140.00 |
| | | | · | 0.00 |
| | | | · | |
| | tributions and religious donations | 14. | Ф | 0.00 |
| | neurance deducted from your new or included in lines 4 or 20 | | | |
| | , , , | 150 | ¢ | 0.00 |
| | | | · | 0.00 |
| | | | · | 0.00 |
| | | | · | 172.00 |
| | | 15d. | \$ | 0.00 |
| | nclude taxes deducted from your pay or included in lines 4 or 20. | | _ | |
| · · · | | 16. | \$ | 0.00 |
| | | | • | |
| | | | · | 308.00 |
| | | | · — | 0.00 |
| rc. Other. Sp | pecify: Storage Unit | 17c. | \$ | 89.00 |
| d. Other. Sp | pecify: | 17d. | \$ | 0.00 |
| | | | • | 0.00 |
| | | . 10. | | |
| | s you make to support others who do not live with you. | 40 | \$ | 0.00 |
| · · · — | | | | |
| | | | | 0.00 |
| | · · · | | · | 0.00 |
| | | | · | 0.00 |
| | | | · | 0.00 |
| | | | | 0.00 |
| e. Homeowr | ner's association or condominium dues | 20e. | \$ | 0.00 |
| ther: Specify: | | 21. | +\$ | 0.00 |
| | | | | |
| - | • | | <u></u> | 4 00 4 00 |
| | • | | | 1,634.00 |
| | | | \$ <u></u> | |
| 2c. Add line 22 | 2a and 22b. The result is your monthly expenses. | | \$ | 1,634.00 |
| alaulata | monthly not income | | | |
| - | • | 00: | Φ. | 4 050 40 |
| | | | | 1,650.10 |
| sb. Copy you | ir montniy expenses from line 22c above. | 23b. | -\$ | 1,634.00 |
| | and the same of th | | | |
| | your monthly expenses from your monthly income. | 23c. | \$ | 16.10 |
| | | ZJU. | ι Ψ | 15.10 |
| | It is your monthly net income. | | | |
| The resul | , | | form? | |
| The resul | an increase or decrease in your expenses within the year after y | ou file this | | e or decrease because o |
| The result o you expect or example, do y | an increase or decrease in your expenses within the year after y | ou file this | | e or decrease because o |
| The result o you expect or example, do y | an increase or decrease in your expenses within the year after y | ou file this | | e or decrease because c |
| 1333 CHI 6 (| tilities: a. Electricity b. Water, se c. Telephon d. Other. Sp cod and hous hildcare and lothing, launce edical and de ransportation o not include o netertainment, haritable con surance. o not include i fa. Life insur fb. Health ins fc. Vehicle ir fc. Other ins axes. Do not i pecify: stallment or ra. Car paym rb. Car paym rb. Car paym rc. Other. Sp cur payments educted from ther payment pecify: ther real prop fc. Mortgage fb. Real esta fb. Property, fb. Homeown ther: Specify: alculate your fa. Add lines 4 fb. Copy line | tilities: a. Electricity, heat, natural gas b. Water, sewer, garbage collection c. Telephone, cell phone, Internet, satellite, and cable services d. Other. Specify: bod and housekeeping supplies hildcare and children's education costs lothing, laundry, and dry cleaning ersonal care products and services edical and dental expenses ransportation. Include gas, maintenance, bus or train fare. bo not include car payments. Intertainment, clubs, recreation, newspapers, magazines, and books haritable contributions and religious donations surance. bo not include insurance deducted from your pay or included in lines 4 or 20. ba. Life insurance bb. Health insurance bc. Vehicle insurance. Specify: baxes. Do not include taxes deducted from your pay or included in lines 4 or 20. becify: baxes. Do not include taxes deducted from your pay or included in lines 4 or 20. becify: baxes. Do not include taxes deducted from your pay or included in lines 4 or 20. becify: baxes. Do not include taxes deducted from your pay or included in lines 4 or 20. becify: baxes. Do not include taxes deducted from your pay or included in lines 4 or 20. becify: baxes. Do not include taxes deducted from your pay or included in lines 4 or 20. becify: baxes. Do not include taxes deducted from your pay or included in lines 4 or 20. becify: bayes and the payments for Vehicle 1 bayes and the payments of a limony, maintenance, and support that you did not report a beducted from your pay on line 5, Schedule I, Your Income (Official Form 106I) bayes and the payments you make to support others who do not live with you. becify: bayes and the payments of the payments you make to support others who do not live with you. becify: bayes and the payments association or condominium dues bayes and lines 4 through 21. | tillities: a. Electricity, heat, natural gas b. Water, sewer, garbage collection c. Telephone, cell phone, Internet, satellite, and cable services c. Telephone, cell phone, Internet, satellite, and cable services c. Telephone, cell phone, Internet, satellite, and cable services c. Telephone, cell phone, Internet, satellite, and cable services c. Telephone, cell phone, Internet, satellite, and cable services c. Telephone, cell phone, Internet, satellite, and cable services c. Telephone, cell phone, Internet, satellite, and cable services c. Telephone, cell phone, Internet, satellite, and cable services c. Telephone, cell phone, Internet, satellite, and cable services c. Telephone, cell phone, Internet, satellite, and cable services c. Telephone, cell phone, Internet, satellite, and cable services c. Telephone, cell phone, Internet, satellite, and cable services c. Telephone, cell phone, Internet, satellite, and cable services c. Telephone, cell phone, Internet, satellite, and cable services c. Telephone, cell phone, Internet, satellite, and cable services c. Telephone, cell phone, Internet, satellite, and cable services c. Telephone, cell phone, Internet, satellite, and cable services c. Telephone, cell phone, Internet, satellite, and cable services c. Telephone, cell phone, Internet, satellite, and cable services c. Telephone, cell phone, Internet, satellite, and cable services c. Telephone, cell phone, Internet, satellite, and cable services c. Telephone, cell phone, later, satellite, and cable services c. Telephone, cell phone, later, satellite, and cable services c. Telephone, cell phone, later, satellite, and cable services c. Telephone, cell phone, satellite, and cable services c. Telephone, cell phone, satellite, and cable services c. Telephone, cell phone cell call and certain satellite, and cable services c. Telephone, cell phone cell call phone cell call and certain satellite, and cable services cell call phone cell call phone cell call phone cell call and certain satellite, and cable services cell cal | tillities: 1. Electricity, heat, natural gas 2. Water, sewer, garbage collection 3. Water, sewer, garbage collection 4. Telephone, cell phone, Internet, satellite, and cable services 5. Other. Specify: 5. Telephone, cell phone, lethernet, satellite, and cable services 6. Septiments of children's education costs 6. Septiments of care products and services 6. In continuous car payments. 6. Control include gas, maintenance, bus or train fare. 6. Or not include car payments. 6. Septiments of care payments. 6. Septiments of contributions and religious donations 6. Septiments of contributions |

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| Fill in this inforr | nation to identify your | case: | | | |
|---|--|----------------------------|---------------------------|-------------------------|--|
| Debtor 1 | Joni Ryver | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | nkruptcy Court for the: | DISTRICT OF UTAH | | | |
| Case number _ (if known) | | | | | ☐ Check if this is an amended filing |
| Official Form | - | ın Individual [| Debtor's Sc | hadulas | 4045 |
| Deciarat | ion About t | iii iiiaiviaaai L | 300 | ilcaulc3 | 12/15 |
| You must file this obtaining money years, or both. 18 | s form whenever you f | n connection with a bankru | r amended schedules. | Making a false state | ement, concealing property, or 00, or imprisonment for up to 20 |
| Did you pa | y or agree to pay some | one who is NOT an attorne | ey to help you fill out b | ankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. N | lame of person | | | | okruptcy Petition Preparer's Notice, n, and Signature (Official Form 119) |
| | Ity of perjury, I declare e true and correct. | that I have read the summa | ary and schedules filed | d with this declaration | on and |
| X /s/ Jon | i Rvver | | Х | | |
| Joni R | | | Signature of | Debtor 2 | |

Date _____

Date **June 6, 2017**

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| Fill in | this informat | ion to identify you | case: | | | |
|------------------|-------------------------------|--------------------------------------|--|---|---|---|
| Debto | | Joni Ryver | | | | |
| | - | First Name | Middle Name | Last Name | | |
| Debto (Spouse | _ | First Name | Middle Name | Last Name | | |
| United | d States Bankr | uptcy Court for the: | DISTRICT OF UTAH | | | |
| Case | number | | | | | |
| (if know | n) | | | | | Check if this is an amended filing |
| Stat | complete and | f Financial | | re filing together, both ar | Bankruptcy e equally responsible for so | |
| | er (if known). | Answer every ques | | · | iy additional pages, write y | our manie and case |
| 1. W | /hat is your co | urrent marital statu | s? | | | |
| • | Married | | | | | |
| | Not marrie | d | | | | |
| 2. D | uring the last | 3 years, have you | lived anywhere other than | where you live now? | | |
| | | | | | | |
| | Yes. List a | I of the places you I | ved in the last 3 years. Do no | ot include where you live no | W. | |
| | Debtor 1 Prior | Address: | Dates Debtor 1 lived there | Debtor 2 Prior A | ddress: | Dates Debtor 2 lived there |
| | 1339 South 1 Salt Lake Cit | 1100 East y, UT 84124 | From-To: 01/2014 - 04/2 | ☐ Same as Debtor | ·1 | ☐ Same as Debtor 1 From-To: |
| | and territories No Yes. Make | include Árizona, Ca | lifornia, Idaho, Louisiana, Ne | vada, New Mexico, Puerto f | nity property state or territo Rico, Texas, Washington and | |
| Fi | ill in the total a | mount of income yo | nployment or from operatin u received from all jobs and a have income that you receive | all businesses, including par | | lendar years? |
| |] No | | | | | |
| | Yes. Fill in | the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | current year until or bankruptcy: | ■ Wages, commissions, bonuses, tips | \$10,320.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

Case 17-24948 Doc 3 Filed 06/06/17 Entered 06/06/17 15:30:12 Desc Main Document Page 32 of 44 Joni Ryver Case number (if known) Debtor 1 Debtor 2 Debtor 1 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$10,530.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$8,596.00 ☐ Wages, commissions, ■ Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

■ No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address Dates of payment **Total amount** Amount vou Was this payment for ... paid still owe

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| 7. | Within 1 year before you filed for bankrupt <i>Insiders</i> include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. It alimony. | artners; relatives of any ger a control, or owner of 20% o | neral partners; partners partners or more of their votin | erships of which yog g securities; and a | ou are a genera iny managing ag | I partner; corporations gent, including one for |
|-----|--|---|---|---|------------------------------------|--|
| | ■ No | | | | | |
| | ☐ Yes. List all payments to an insider. | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment |
| 3. | Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost | | ments or transfer a | any property on a | account of a de | bt that benefited an |
| | ■ No | | | | | |
| | Yes. List all payments to an insider | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for the Include credit | this payment |
| Pai | rt 4: Identify Legal Actions, Repossession | ns. and Foreclosures | pulu | | morado ordan | tor o riamo |
| 9. | Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No | | | | | |
| | Yes. Fill in the details. | N. Cal | | | 0 | |
| | Case title Case number | Nature of the case | Court or agency | | Status of the | e case |
| | Mountain Land Collections v. Joni Ryver Unknown | Unsecured | Third District Court 450 S State St, Salt Lake City, UT 84111 Salt Lake City, UT 84111 | | Concluded | |
| | | | | | Garnished | Pre-petition. |
| 10. | Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo No. Go to line 11. Yes. Fill in the information below. | w. | erty repossessed, f | | | |
| | Creditor Name and Address | Describe the Property Explain what happened | 4 | Date | | Value of the property |
| | MOUNTAIN LAND COLLECTION | Wages | u | 01/2 | 017 - | \$809.32 |
| | PO BOX 1280 American Fork, UT 84003-6280 | ☐ Property was reposse☐ Property was foreclos | sed. | 06/2 | 017 | |
| | | Property was garnish | | | | |
| | | ☐ Property was attache | d, seized or levied. | | | |
| 11. | Within 90 days before you filed for bankru accounts or refuse to make a payment bed | | luding a bank or fi | nancial institution | n, set off any a | mounts from your |
| | Yes. Fill in the details. | | | | | |
| | Creditor Name and Address | Describe the action the | e creditor took | Date taker | action was | Amount |

Case 17-24948 Doc 3 Filed 06/06/17 Entered 06/06/17 15:30:12 Desc Main Page 34 of 44 Document Case number (if known) Debtor 1 Joni Ryver 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No ☐ Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο п Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No П Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of **Address** transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment made

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Debtor 1 Joni Ryver

| 18. | Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busi Include both outright transfers and transfers made include gifts and transfers that you have already li No Yes. Fill in the details. | iness or financial affa e as security (such as th | irs? ne granting of a | | | |
|-----|--|---|----------------------------|------------------------|---|---|
| | Person Who Received Transfer Address | Description and va | | payme | ibe any property or ents received or debts n exchange | Date transfer was made |
| | Person's relationship to you | | | | | |
| 19. | Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No Yes. Fill in the details. | | y property to a | self-settle | d trust or similar device o | f which you are a |
| | Name of trust | Description and va | alue of the prop | erty trans | ferred | Date Transfer was |
| | | | | | | made |
| Par | t 8: List of Certain Financial Accounts, Instru | uments, Safe Deposit | Boxes, and Sto | orage Unit | s | |
| 20. | Within 1 year before you filed for bankruptcy, v sold, moved, or transferred? Include checking, savings, money market, or checking transfer and tran | other financial accoun | ts; certificates | of deposi | | |
| | houses, pension funds, cooperatives, associated No | tions, and other finan | ciai institutions | S. | | |
| | Yes. Fill in the details. | | | | | |
| | | ast 4 digits of ccount number | Type of account instrument | int or | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| 21. | Do you now have, or did you have within 1 year cash, or other valuables? | ar before you filed for | bankruptcy, an | y safe de _l | oosit box or other deposit | ory for securities, |
| | ■ No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acce Address (Number, St State and ZIP Code) | | Describe | the contents | Do you still have it? |
| 22. | _ | place other than your | home within 1 | year befoi | e you filed for bankruptcy | /? |
| | No Silving A 4 4 4 | | | | | |
| | Yes. Fill in the details. | M() | | D 'I | th t t - | D |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or h to it? Address (Number, St State and ZIP Code) | | | | Do you still have it? |
| | CubeSmart Self Storage 4640 900 E, Salt Lake City, UT 84117 Salt Lake City, UT 84117 | Debtor and Robe Shayne Baker. | ert | Items lis | ted on Schedule A/B. | □ No ■ Yes |
| | | | | | | |
| Par | t 9: Identify Property You Hold or Control for | r Someone Else | | | | |
| 23. | Do you hold or control any property that some for someone. | eone else owns? Inclu | de any propert | y you bor | rowed from, are storing fo | or, or hold in trust |
| | ■ No | | | | | |
| | Yes. Fill in the details. | 14 /1 ! - !! | 1 0 | D | (l | ., |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the propo (Number, Street, City, St Code) | | Describe | the property | Value |

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Joni Ryver Debtor 1

| Part 10: Give Details Abo | out Environmental Information |
|---------------------------|-------------------------------|
|---------------------------|-------------------------------|

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

| | | emeans any location, facility, or propert own, operate, or utilize it, including disp | · · · · · · · · · · · · · · · · · · · | ıw, whethe | ∍r you now own, operate | , or utilize it or used | | | |
|-----|---|--|--|---|----------------------------|-------------------------|--|--|--|
| | | <i>rardous material</i> means anything an env ardous material, pollutant, contaminant | | waste, haz | zardous substance, toxic | substance, | | | |
| Rep | ort a | II notices, releases, and proceedings th | at you know about, regardless of when | they occur | rred. | | | | |
| 24. | Has | any governmental unit notified you tha | t you may be liable or potentially liable | under or in | າ violation of an environr | nental law? | | | |
| | | No Yes. Fill in the details. | | | | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | | onmental law, if you it | Date of notice | | | |
| 25. | Hav | e you notified any governmental unit of | any release of hazardous material? | | | | | | |
| | | No Yes. Fill in the details. | | | | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | | onmental law, if you it | Date of notice | | | |
| 26. | Hav | re you been a party in any judicial or adı | n any judicial or administrative proceeding under any environmental law? Include settlements and orders. | | | | | | |
| | | No Yes. Fill in the details. | | | | | | | |
| | | se Title se Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of t | the case | Status of the case | | | |
| Pai | t 11: | Give Details About Your Business or | Connections to Any Business | | | | | | |
| 27. | Witl | hin 4 years before you filed for bankrup | tcy, did you own a business or have an | of the foll | lowing connections to a | ny business? | | | |
| | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time | | | | | | | | |
| | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | | | | | | |
| | ☐ A partner in a partnership | | | | | | | | |
| | | ☐ An officer, director, or managing ex | ecutive of a corporation | | | | | | |
| | | ☐ An owner of at least 5% of the votin | g or equity securities of a corporation | | | | | | |
| | | No. None of the above applies. Go to | Part 12. | | | | | | |
| | | Yes. Check all that apply above and fil | I in the details below for each business | | | | | | |
| | | siness Name | Describe the nature of the business | | oyer Identification numb | | | | |
| | Address (Number, Street, City, State and ZIP Code) | | Name of accountant or bookkeeper | Do not include Social Security n r Dates business existed | | y number or IIIN. | | | |
| | | | | | | | | | |

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☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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| Fill in this infor | mation to identify your | case: | | |
|--------------------------------------|--|---|--|---|
| Debtor 1 | Joni Ryver | | | |
| | First Name | Middle Name | Last Name | _ |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | _ |
| United States Ba | ankruptcy Court for the: | DISTRICT OF UT | AH | |
| | | | | |
| Case number _ (if known) | | | | ☐ Check if this is an amended filing |
| | | | iduals Filing Under Cha | apter 7 12/15 |
| | e claims secured by yo | • • • | out this form ii. | |
| You must file thi | ever is earlier, unless th | ithin 30 days after | ot expired. you file your bankruptcy petition or by the c e time for cause. You must also send copies | |
| | eople are filing togethe nd date the form. | r in a joint case, bo | th are equally responsible for supplying cor | rect information. Both debtors must |
| | and accurate as possib our name and case nui | | needed, attach a separate sheet to this for | m. On the top of any additional pages, |
| Part 1: List Y | our Creditors Who Hav | e Secured Claims | | |
| 1. For any credit | ors that you listed in P | art 1 of Schedule D | : Creditors Who Have Claims Secured by Pr | operty (Official Form 106D), fill in the |
| information be Identify the cr | elow. editor and the property t | hat is collateral | What do you intend to do with the proper secures a debt? | ty that Did you claim the property as exempt on Schedule C? |
| | | | | |
| Creditor's P name: | Prestige Financial Sv | С | ☐ Surrender the property.☐ Retain the property and redeem it. | □ No |
| | 2008 Chevrolet Im | pala 105,000 | Retain the property and enter into a Reaffirmation Agreement. | ■ Yes |
| property securing debt: | (Lien Prestige F | inancial) | Retain the property and [explain]: Continue making payments. | |
| Part 2: List Y | our Unexpired Persona | I Proporty Lossos | | |
| For any unexpire in the information | ed personal property le on below. Do not list rea | ase that you listed al estate leases. Un | in Schedule G: Executory Contracts and Un expired leases are leases that are still in eff he trustee does not assume it. 11 U.S.C. § 3 | ect; the lease period has not yet ended. |
| Describe your u | unexpired personal pro | perty leases | | Will the lease be assumed? |
| Lessor's name: Description of lea | ased | | | □ No |
| Property: | | | | ☐ Yes |
| Lessor's name: Description of lea | ased | | | □ No |
| Property: | | | | ☐ Yes |
| Lessor's name: | | | | |
| Official Form 108 | | Statement of In | tention for Individuals Filing Under Chapter | 7 page 1 |

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| Deb | otor 1 | Joni Ryver | Case number (if known) |
|-----------|--------------------------------|---|--|
| | scription perty: | n of leased | □ No □ Yes |
| Des | sor's n scription perty: | ame: n of leased | □ No |
| Des | sor's n scription perty: | ame: n of leased | □ No □ Yes |
| Des | sor's n scription perty: | ame: n of leased | □ No □ Yes |
| Des | sor's n scription perty: | ame: n of leased | □ No □ Yes |
| Und | er pen | | ed my intention about any property of my estate that secures a debt and any personal |
| prop X | /s/ J | nat is subject to an unexpired lease. oni Ryver Ryver | XSignature of Debtor 2 |
| | | June 6, 2017 | Date |
| | | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | | Liquidation | |
|------------|----------------|--------------------|--|
| \$24 | 1 5 | filing fee | |
| \$7 | 75 | administrative fee | |
| + \$ | 15 | trustee surcharge | |
| \$33 | 35 | total fee | |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-24948 Doc 3 Filed 06/06/17 Entered 06/06/17 15:30:12 Desc Main Document Page 44 of 44

United States Bankruptcy Court District of Utah

| | | District of Utan | | | | | | | |
|--|--------------|------------------|----------|---|--|--|--|--|--|
| In re | Joni Ryver | | Case No. | | | | | | |
| | | Debtor(s) | Chapter | 7 | | | | | |
| | VE | MATRIX | | | | | | | |
| The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge. | | | | | | | | | |
| Date: | June 6, 2017 | /s/ Joni Ryver | | | | | | | |
| | | Joni Ryver | | | | | | | |

Signature of Debtor